

157 1/31/01

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | | 8 | 01/04/01 |
| FORMALITY REVIEW | JK | 835 | 01/10/01 |
| RESPONSE FORMALITY REVIEW | | | |

INDEX OF CLAIMS

✓ Rejected N Non-elected
= Allowed I Interference
- (Through numeral) ... Canceled A Appeal
÷ Restricted O Objected

| Claim | Date |
|----------|----------|
| Final | |
| Original | |
| 1 | 04/17/03 |
| 2 | 04/17/03 |
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| Claim | Date |
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| Claim | Date |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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